State of South Dakota Candidate's or Committee's Report of Receipts and Expenditures



RECEIVED

Candidates and candidate committees: File in the office where you filed your nominating petition 12 2005 PACs, political party, ballot question and other committees: File with Elections Department, Secretary of

State's Office, 500 E Capitol Ave, Pierr	re, SD 57501-5070		T. OLU. OF STA
See "South Dakota Campaign Finance	Reporting Guideline	es" for specific instructions on comp	oleting this report.
Name of Candidate or Committee:	South Dakota A	ssociation for Specialty Care Provi	ders PAC
Complete Mailing Address: 1868 L	ombardy Drive, Raj	pid City, SD 57703	
Name of Person Making Report:	Jack Kaup		
Daytime Phone Number: 605-72	1-4918		
If you are a candidate, what office a	re you seeking:	N/A	
If you are a ballot question committed during the reporting period and whe		* *	olved with
Type of Report:		Year End	
For Reporting Period Ending:		D	ecember 31, 2004
The following verification must be co	-	ibmitting report.	
I, Jack Kaup	(type name), cer	rtify that I have examined this repor	t and to the best
of my knowledge and belief it is true, of	correct and complete	e.	
Date: 1/10/05		R Kury ture or Signature of Committee Treasu	rer or Chairperson
Revised March 1999 Ver 1.01		Chi. V SECRETARY	Wy Of Nelson OF STATE

Total of Itemized Contributions from Individuals:

South Dakota Association for Specialty Care Providers PAC

For the reporting period ending:

Schedule A - Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Uniterrized Contributions from Individuals: Itemized Contributions from Individuals: Name Residence Address Place of Employment (Name of Employer) Amount \$500.00 2402 Burleigh St., Yankton, SD 57078 Yankton Surgical Associates **David Abbott** Jeffrey Liudahl 810 E. 18th St., Yankton, SD 57078 Yankton Surgical Associates \$500,00 Paula Hicks 2300 Burleigh St., Yankton, SD 57078 Willcockson Eye Associates \$500.00 Don Swift 142 Katherine Way, Yankton, SD 57078 Yankton Surgical Associates \$500.00 Myles Tieszen 29901 439th Ave., Utica, SD 57067 Yankton Surgical Associates \$500.00 Yankton Urological Center \$500.00 Joseph Boudreau 2308 Burleigh, Yankton, SD 57078 Midwest Ears, Nose, & Throat \$250.00 Daniel Todd 5800 S. Copperhead Dr., Sioux Falls, SD 57108 **Bradley Thaemert** Surgical Institute \$250.00 212 W. Hazeltine Ln., Sioux Falls, SD 57108

\$3,500.00

South Dakota Association for Specialty Care Providers PAC

\$3,500.00

For the reporting period ending:

Total of All Direct Contributions:

Schedule A - Direct Contributions (continued)

mized Contributions from Political Parties:		1 .
Party Name	Address	Amount
tal Contributions from Political Parties:		\$
mized Contributions from Political Action Co	mmittees (PAC's) - All contributions from PA	
PAC Name	Address	Amount

South Dakota Association for Specialty Care Providers PAC

For the reporting period ending:

Schedule B - Fund-Raising Events Proceeds

List on this schedule fund-rai	sing events held to raise money	for the candidate a	nd the net proceeds o	derived from eac
event. If a contributor gives i	more than \$100 or their contribut	tion results in their a	aggregate being more	than \$100 in the
calendar vear, those contribu	tions must be itemized on Sche	dule A.		

Type or Name of Event	Net Proceeds	
	-	
Total:	\$0.00	

Schedule C - In Kind Contributions

Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported.

Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value
	Tabel	****
	Total	\$0.00

Schedule D - Other Income

Use this schedule to report any refunds, interest earned or other income which is not a direct contribution.

Source of Income	Amount
Total:	\$0.00

South Dakota Association for Specialty Care Providers PAC

For the reporting period ending:

Schedule E - Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Expenses		Contributions Made to Candidates and Committees		
Item	Amount	Name of Candidate or Committee	Amount	
Advertising				
Consulting				
Postage				
Printing				
Rent				
Salaries				
Telephone				
Travel			·····	
Utilities				
List other expense items below	List other expense amounts below			
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		Total Expenditures:	\$0.00	

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

Owed to:	Owed for:	Amount
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	Total Obligations:	\$0.0

Name of Candidate or Committee: For the reporting period ending:

South Dakota Association for Specialty Care Providers PAC

Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period.

1.	Amount on hand, if any, at the beginning of the reporting period:		\$1,646.00
2.	Receipts		
	Schedule A - Direct Contributions	\$3,500.00	
	Schedule B - Fund-Raising Events	\$0.00	
	Schedule C - In Kind Contributions	\$0.00	
	Schedule D - Other Income	\$0.00	
	Total of all Receipts	\$3,500.00	
3.	Total Monetary Receipts		\$3,500.00
4 .	Candidate's Personal Contribution to Own Campaign		\$0.00
5.	Monetary Loans to Candidate or Committee During Reporting Period		\$0.00
6.	Monetary Loans Repaid During Reporting Period		\$0.00
7.	Expenditures - Schedule E		\$0.00
8.	Unpaid Obligations - Schedule F	\$0.00	
9.	Amount on hand at the close of this reporting period. *		\$5,146.00

^{*}The amount on hand at the close of the reporting period should equal the amount of money which the committee has on hand in all checking, savings and cash accounts on last day of the reporting period.